Misuses of the Mind:
A Biosynthesis Approach to the Problem of Premature Thinking

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> "One day, maybe, there will exist a well informed, well considered, and yet fervent public conviction that the most deadly of all posssible sins is the mutilation of a child's spirit; for such mutilation undercuts the life principle of trust, without which every human act, may it feel ever so good and seem ever so right, is prone to perversion by destructive forms of conscientiousness"
>
> Erik Erikson

"Destructive forms of conscientiousness" is a good way to identify the themes of this talk. By "Misuses" I mean those ways of using the mind that arise out of the lose of trust in early life. Precocious consciousness arising from this lose is characterized by a splitting of mindbody unity and a tendancy to experience oneself as inalterably seperate from other people.

This presentation has three sources of inspiration: my own clinical and personal experience, the recent psychoanalytic anthology by Corrigan and Gordon The Mind Object: Precocity and the Pathology of Self-Sufficiency and the clinical writing of the Bioenergeticist, Robert Lewis MD, specifically those dealing with his concept of "cephalc shock". For the overall approach, I owe much to my 3 years of training with David Boadella at the Center for Biosynthesis International in Heiden, Switzerland.

A focus of this paper is the general problem of "mentalizing" experience with a special emphasis on two forms of mentalizing: When the mind replaces others and when the mind replaces a personal psychosomatic whole or Body Self. I will be taking a developmental approach here and asking - what life circumstances, predisposition's or developmental experiences result in the excelleration of or over-investment in mental functioning at the expense of "mutual connection" to others and an integrated sense of Self. My conception of this integrated self owes much to the thinking of DW Winnicott especially his notion of the "going-on-being" of the psychesoma/self which is continuous experience of "the interlaced mingling of ideation, affect and the somatic". Of course Winnicott had very clear relational ideas about how this psychosomatic unity gets

broken. I share his perspective but also wonder about other forces that also mediate for greater mentalizing e.g. character structure, pre-personal arrangements in a body resulting from genetics and hardwiring, or a general human tendency toward transcendence.

What makes some uses of the mind healthy and others destructive? This is a highly relative and complex judgment . For the purposes of this talk I am suggesting that thinking becomes destructive when the contents of the mind take on a greater importance and garners a greater proportion of the organism's energy and attention than the biological, sensorial, emotional, or interpersonal dimensions of the person. If we find, as Winnicott did, that mind is "a special agency of the psychesoma that makes self-objectification, communication, thinking and the search for meaning possible", we can see that mind contributes mightily to the skills that make homo sapiens potentially human. The activities of mind become destructive only when self-objectifying capacity gets confused with being an "object", when they seeks more to hide than to communicate , when thought becomes obsession, and when the search for meaning is abandoned for an isolated and lifeless survival in the mind.

The Body Psychotherapy Context

Mentalizing of experience is both an obvious and an ironic focus for a Body Psychotherapy paper. On one hand Body Psychotherapy was "invented" in a certain sense as a solution to the problem of disembodied living. On the other hand, there has been a disdain in the field for matters of thought, the mind and the head.

Wilhelm Reich, the founding father of somatic psychotherapy, promoted the energetic flow and "vegetative streamings" in the body and warned of the consequences of energetic stasis. However his model of flow was torso-centered and omitted the brain and head. Robert Lewis MD noticed this omission and wondered about the lack of a somatic psychotherapy model that links head to body energetically and in terms of the flow of respiration.

It may be that there is a simplistic prejudice in Body Psychotherapy against thinking in general. This is most likely a corrective reaction against the Cartesian "cogito...' and the ego/cognitive bias of psychoanalytic ego psychologists of the 60's and

70's. There are numerous Bioenergetic critiques of "head consciousness" and of "being in one's head".

The developmental focus is absent from most somatic psychology writing in this period and ideas about how and why thinking becomes the realm of defense from experience are not well developed. In addition, the non-relational focus of the Reichian traditions removes from awareness the interpersonal nature of the type of experience that drive us into our heads.

Etiological Considerations in Pre-mature Thinking

As I mentioned above, a number of forces may conspire to promote a mentalizing of personal and interpersonal experience. A number of these may be pre-experiential e.g. genetics, the hardwiring of the brain, physical evolution. Nonetheless, in a prototypical normative development growth follows inner and outer laws with a tendency toward self-organization and self regulation that includes a impulse for relatedness and integration. We are shot into the world with an evolutionary drive toward a fulfillment which is both biological and deeply personal. Our "formative process" meets the "organizing field" of our human and physical environment (as the fetus meets the womb or the client their therapist).

A good enough resonance between environment and the formative process creates a good atmosphere for this personal and biological unfolding.

> "If the organizing field is in resonance with the growth needs of the person, the growth will express the person's essence. If not, there is a deformation and essence is split from (biological) existence" David Boadella

Some of this disorganizing experience comes in the form of environmental failures such as erratic or intrusive handling and attention, unresponsiveness, or a failure to help with containment of experience. Additionally the universal pre-maturity of the human neo-nate may also play a role here.

The human infant is in any case born "premature" and requires a good deal of resonance from the human and physical environment. It has severe limits on what it can do to control it's own environment, prevent intrusion, or manage it's own internal state. As Stanley Keleman has written, we need others to provide structure and interpret us until the capacity for our own internal somatic dialogue between thinking, feeling and acting is better established.

> " It could be said that at the beginning the mother must adapt almost exactly to the infant's needs in order that the infant's personality can develop without distortion. She is able to fail in her adaptation and to fail increasingly, and this is because the infant's mind and the infants intellectual processes are able to account for and to allow for failures in adaptation. In this way the mind is allied to the mother and takes over part of her function"
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> (Winnicott, "Mind and It's Relation to the Psychesoma" in Collected Papers 1958)

But, in cases of erratic, intrusive or unresponsive parenting.....

> "the baby survives by means of the mind. The (parent) exploits the baby's power to think things out and to collate and to understand. If the baby has a good mental apparatus this thinking becomes a substitute for maternal care and adaptation. The baby mothers himself by means of understanding, understanding too much. In the extreme the mind and the baby's thinking has enabled the baby, now growing up and acquiring a developmental pattern, to do without the most important aspect of the maternal care that is needed by all human beings, namely reliability and adaptation to basic need"
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> (Winnicott, 1965, Introductory lecture for "New light on Children's Thinking")

Some of this collating and understanding on the part of the infant is of course part of their personal and biological developmental unfolding. These capacities allow the parent to respond a fraction of second later than optimal and in so doing throw the child into a rudimentary self-reflection and engage the infant in nascent capacities for containment of experience and sense of self. But, when we have a sufficiently jarring environmental failure the "going-on-being" of the infant may be experienced as threatened. Impingements from the environment or failures to protect, shelter and be attuned by caretakers and parents can throw the child into a state of internal chaos and confront the infant with deep primitive fears described by Winnicott as the "unthinkable anxieties".

These anxieties should be of particular interest to the Body Psychotherapist as they are all powerfully somatic.....

1/"Going to pieces"
2/ "Falling forever"
3/ "Having no relation to the body"
4/ "Having no orientation"
5/ "Complete isolation because of there being no means to communicate"

(Winnicott, "Ego Integration in Child Development" from The Maturational Processes and the Facilitating Environment, 1965)

The child in this situation casts about for a way to hold onto themselves and to get a handle on their out-of-control experience. The infant is forced into a reactive (vs. creative and active) mode with the environment that is not resonating with them. Rumination, planning, rehearsing, avoidance of experience , and recovery become the primary self-organizing framework. The capacity for quiet, internal, private, self-experience is compromised.

" The mind in such a case has a false function and a life of it's own, and it dominates the psyche-soma instead of being a special function of the psyche-soma'.
(Winnicott, Human Nature, p. 140, 1988)

In these circumstances, mind and the physical control of the head and neck can be evoked defensively and prematurely to

1/ Manage the upset and restore homeostasis in the case of intrusive handling
(Robert Lewis MD, "Cephalic Shock as a Somatic Link to the False Self Personality", 1983)

2/ Replace the missing contact with a "mind object" in the case of deprivation
(Gordon and Corrigan, The Mind Object , Aronson, 1995 page/xiv)

3/ Shape a mental sense of self to replace the disrupted or lost body self.

Two responses to these experiences are the focus here.

First, the emergence of a "mind object" when mental capacity is forced not only to be a mutually-connected, relational ally of the parent, but to take over basic functions of the parent such as self-calming, interpretation of the world and the way it works, planning action, and companionship.

Secondly, the formation of a "false self" where the mind becomes a replacement for self and self-experience. This is a psycho physiological process according to Lewis, when, in an attempt to reduce overwhelm and a lose of integrity, the infant clenches the neck, cutting off the head and the flow between gut and head. In the relative safety of the head, it is possible to create a mentally based sense of self cut off from the overwhelming feelings of fear, pain and rage from the viscera.

The goal of work with this type of mentalizing process is to return the mind to it's position as necessary companion to the self and not as over, above or outside the psychosomatic self.

Ecto, Meso and Endodermic Considerations

On a more speculative note, there may be some link between the pattern described above and a naturally occurring intellectual precocity. Even as neonates, we all use what we have to give us a survival edge. Faced with distress of this magnitude, we will use what is available to get a handle on or move ourselves away from

the emotional and interpersonal upset. Those gifted with relatively high energy and predilection for brain and nervous system activation (ectomorphs) may be prone to this solution to extreme distress. The mesomorphic infant might "choose" an excellerated impulse solution resulting in precocious muscular milestones and hyperactivity. The endomorphic child might manifest the distress more internally as colic, intestinal distress, asthma, or eating issues.

Therapy With Mentalizing Clients

Clients with these tendencies tend to take care of themselves overly well in therapy. They can be intellectually very stimulating and have interesting perspectives. Avoidance of dependency and minimizing needs is common. There may be great verbal ease and this is a good point of entry, through language, toward feeling and action. There is often a very developed capacity for waiting often with a rich and subtle fantasy life that maintains relationship in the mind. Lacking in the self-organizing edge that is provided by having clear contact with needs, these clients, ungrounded in the body as they are, may have greater than usual difficulty in understanding their own motivations.

In a more specific manner I have created the following chart that graphs some possible interventions for mentalizing clients. Along the left side are listed what we in Biosynthesis call the Life Fields, which are the seven principle arenas of activity in human life. Across the top are listed three principle psychotherapeutic processes in Biosynthesis (Grounding, Centering, and Facing) which also correspond to the three developmental tissue spheres of meso, endo and ectodermic activity. This chart demonstrates a slice of Biosynthesis methodology in moving between theory and practice with this particular type of client. It is not intended as a "cookbook", but more a way to organize an approach and develop interventions to be used as the issues emerge for the client's process. It's unavoidably clear that this type of chart also demonstrates the writers personal interest in these issues as well .

	Grounding/meso	Centering/endo	Facing/ecto
Motor/Muscle (Action)	Grounding the head and working w/ the deep musculature of the neck. ** Working w/ the head as a limb and as a point of expression	-Work w/ impulse qualities & latent movm't expression - T uses own body as ancillary container & models for C the use of muscle as resource	Engage client in body to body communication using hands, feet and head - expand C's movement vocabulary
Energetic (Flow)	Work to balance charge throughout the body	-help distinguish excitment from anxiety - encourage pleasure in excitment- teach energetic self-regulation thru breath	encourage communica -tion of internal sensa tion* T mirrors c's differentiated emo= tional expression *sup port taking in
Relationship (Contact)	-reestablish contact as a resource * -support establishment of the human "ground" thru phys. contact *Support adult sexuality	T and therapy become a container for self contact * Build private body space* Support capacity "to be alone in the presence of others"	-encourage taking in(w/ ears and eyes) and coming out through the face as a way of letting contact be Real
Affect (Emotion)	Support the container as much as the contents* -overtime, make room for the ex-pression of fear	Release emotion in contact	Reestablish affect as communication given and received* acknow-ledge all emotional communication
Image (Imagination)	Encourage and offer ,if necessary, "embodied" mental images	invite images of "center" and heart and pictures that facilitate full self contact	T speaks re: unspoken fear, chaos, and terror images* Help external -ize the often well dev eloped relat. life that lives in pictures and int. images of others
Thought (Language)	Ground all language in the here & now * Use whole language and body sounds	Use language that translates Up &Down in the body*Exploratory vs Explanatory	T witnesses and mir-rors the truth of the C's communication Develop capacity to "not know"
Essence (Spirit)	Promote and teach body focused meditation	Encourage "being" and joy	listen for the voice of the heart model respect for one's own heart and the hearts of others